24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

| SCHEDULE E) | PAGE 1 OF 28 FOR SE OF FORM 24/48 |
|---|---|
| NAME OF COMMITTE (In Full) | FEC IDENTIFICATION NUMBER ▼ |
| Workers' Voice | C C00484287 |
| | G 00404207 |
| Check If 24-hour report 48-hour report New report Amends report filed | d on 09 / 26 / 2012 |
| Full Name (Last, First, Middle Initial) of Payee | Date |
| Mack Crounse Group | M M / D D / Y Y Y Y |
| Mailing Address 2001 N. Beauregard Street | . 09 24 2012 |
| Suite 420 | Amount |
| City State Zip Code | 1000.00 |
| Alexandria VA 22311 | 1000.00 Transaction ID : D452371 |
| Purpose of Expenditure Category/ Odd | ce Sought: House State: |
| Flier Production Type 004 | Senate District: 00 |
| Name of Federal Candidate Supported or Opposed by Expenditure: | President ——— |
| | eck One: Support 🔀 Oppose |
| Dict | oursement For: Primary Kanada |
| Calendar Year-To-Date Per Election for Office Sought 413922.86 | |
| | Other (specify) |
| Full Name (Last, First, Middle Initial) of Payee Mack Crounse Group | Date |
| Mack Clourise Group | 09 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Mailing Address 2001 N. Beauregard Street | 24 2012 |
| Suite 420 | Amount |
| City State Zip Code | 200.00 |
| Alexandria VA 22311 | Transaction ID : D452372 |
| ('aleuota' | ce Sought: House State: |
| Flier Production Type 004 | Senate District: 00 |
| Name of Federal Candidate Supported or Opposed by Expenditure: | President ——— |
| Barack Obama Che | eck One: Support Oppose |
| Calendar Year-To-Date Per Election Dist | oursement For: Primary X General |
| for Office Sought 413922.86 2012 | Other (specify) |
| | |
| () OUDTOTAL () | |
| (a) SUBTOTAL of Itemized Independent Expenditures | 1200.00 |
| 4 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| 4 | |
| (c) TOTAL Independent Expenditures | |
| | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | |
| Ms. Elizabeth H Shuler | M / D D / V V V V |
| [Electronically Filed] Date | 10 16 2012 |
| Signature | |